

SYN. NO. \_\_\_\_\_

AGN. NO. \_\_\_\_\_

MOTION BY SUPERVISOR ZEV YAROSLAVSKY

AUGUST 16, 2005

On April 12, 2005, the Board of Supervisors directed the Director of Health Services to make recommendations, based on his best professional judgment, on the next steps that should be taken to establish and ensure quality hospital care at King/Drew Medical Center (KDMC). August 16 was subsequently established as the Board meeting date at which that report would be considered. In response to the Board's directive, on August 5 the Director of DHS made a series of recommendations to the Board of Supervisors to establish KDMC as an academic community hospital.

KDMC remains a troubled medical institution in need of radical reform and transformation. Time is of the essence if the hospital is to be saved. KDMC lost its Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) accreditation earlier this year. At the same time, the federal Center for Medicare and Medicaid Services (CMS) is monitoring the medical center's ability to provide safe and competent hospital care. If CMS concludes that the hospital does not meet its standards and decides to revoke its funding of KDMC, it would likely result in the hospital's closure.

In other words, postponing action today on the DHS Director's recommendations--or any medically credible alternative to those recommendations---may well place the very existence of the hospital in jeopardy by the end of this year.

MOTION

BURKE \_\_\_\_\_

YAROSLAVSKY \_\_\_\_\_

KNABE \_\_\_\_\_

ANTONOVICH \_\_\_\_\_

MOLINA \_\_\_\_\_

In the interest of saving KDMC, the Board of Supervisors should maximize, not restrict its options. For this reason, the Board should proceed today to set the Beilenson Hearings that are required in order to implement the report's recommendations. The Board should also set a date by which the Hospital Advisory Board for KDMC, other stakeholders and any other interested parties can provide their input and/or suggest constructive alternatives to the Director's recommendations that might likely lead to a turnaround of the hospital's fortunes. Enough time should be allowed for DHS to respond to those comments in advance of the Beilenson Hearings so that the Board of Supervisors can have the benefit of all of the information in advance.

Following the Beilenson hearings, the Board of Supervisors will be in a position to either approve the implementation of the Director's August 5<sup>th</sup> recommendations, or to approve an alternative that may have been presented to it. The advantage of this approach is that it allows the Board maximum flexibility to decide the future course of KDMC without further delay and jeopardy to the hospital's existence.

Change and reform at KDMC do not come easily, nor are they free from controversy. Nevertheless, in the interest of safe and competent hospital care, changes must be made. Regardless of what steps the County chooses to take to fix KDMC, one thing is certain: the County can no longer afford to delay its decision-making process.

I, THEREFORE, MOVE that in order to preserve all of its options in reforming Martin Luther King Jr./Charles R. Drew Medical Center without delay, the Board of Supervisors instruct the Department of Health Services to schedule a Beilenson Hearing on Tuesday, October 18 at noon in the Board of Supervisors hearing room to consider revisions of the clinical footprint at KDMC as recommended by the August 5,

2005, report by the Director of DHS.

I FURTHER MOVE that the Hospital Advisory Board, other stakeholders and any interested parties be requested to provide written comments on the Director's recommendation or any alternatives to those recommendations by September 30, 2005, and that the Director provide his written response to those comments by October 7, 2005; and

I FURTHER MOVE that the Board direct the Department of Health Services and other departments as necessary to:

- prepare a plan to modify KDMC staffing and budget, without any increase in net County cost, to expand various medical services in response to the healthcare delivery needs of Service Planning Area (SPA) 6 including cancer screening, detection and treatment; diabetes, high cholesterol and high blood pressure services; and outpatient general and specialty pediatric services, as outlined in the August 5, 2005 report, for consideration by the Board at its October 18 meeting;

- continue discussions with all interested parties to define the financial, operational and contractual parameters for contracting out the operation of KDMC;

- work with Navigant Consulting, Inc. to develop a plan for reduced or revised consultant services at KDMC, as appropriate, upon expiration of its current contract (October 31, 2005); and

- develop a revised staffing model for the entire KDMC facility, similar in cost and structure to the staffing models at Olive View-UCLA and Harbor-UCLA Medical Centers, for consideration by the Board at its October 18 meeting.